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| Type of Application <input type="checkbox"/> New <input type="checkbox"/> Renewal | Original Date: _____ AE No _____ |
| Applicant's Name _____ <div style="display: flex; justify-content: space-around; font-size: small;"> First Middle Last </div> | |
| Home Address _____ <div style="text-align: center; font-size: small;">Street or PO Box</div> | |
| _____ <div style="display: flex; justify-content: space-between;"> City State Zip Code </div> | |
| Telephone: _____ Social Security Number: _____ | |
| Date of Birth: _____ Age: _____ Sex: <input type="checkbox"/> M <input type="checkbox"/> F Color of Eyes: _____ | |
| Weight: _____ lbs Height: _____ ft _____ in Color of Hair: _____ | |
| Name of Firm _____ | |
| Mailing Address _____ <div style="text-align: center; font-size: small;">Street or PO Box</div> | |
| _____ <div style="display: flex; justify-content: space-between;"> City State Zip Code Telephone Number </div> | |
| Have you ever been convicted of any crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes," indicate the date, type and location of the offense, the arresting agency, and the court disposition and sentencing information. (Use back of application) | |
| Have you lived in another State within the last five years? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| <u>READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING THIS APPLICATION:</u> I affirm that this application contains no misrepresentation or falsification and the information is true and complete to the best of my knowledge and belief. I also understand and agree that failure to conduct business according to the adopted statutes and administrative rules of the State of Utah with regard to fire alarm inspection and testing will subject myself to the possibility of the loss of my license and/or the possibility of criminal prosecution. | |
| Signature | Date |

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| <input type="checkbox"/> Certificate of Registration <input type="checkbox"/> Basic Fire Alarm Technician <input type="checkbox"/> Fire Alarm Technician <input type="checkbox"/> Master Fire Alarm Technician | \$40.00 | |
| <input type="checkbox"/> Examination Fees | \$30.00 | |
| <input type="checkbox"/> Renewal of Fire Alarm System Certificate of Registration | \$40.00 | |
| | Total | |

| | | | | | | | | | |
|----------------|--|----------------|--|----------------|--|----------------|--|----------------|--|
| Original Date | | Renewal Date | | Renewal Date | | Renewal Date | | Renewal Date | |
| Amount Paid | | Amount Paid | | Amount Paid | | Amount Paid | | Amount Paid | |
| Receipt # | | Receipt # | | Receipt # | | Receipt # | | Receipt # | |
| Date cert sent | | Date cert sent | | Date cert sent | | Date cert sent | | Date cert sent | |

